

Substitute for form 1449/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

**Complete if Known**

Application Number	10/560,963
Filing Date	December 14, 2005
First Named Inventor	HEBBLEWHITE et al
Art Unit	3763
Examiner Name	To be assigned
Attorney Docket Number	3869/035 US

[illegible]

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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